UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address: COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450

www.uspto.gov

# NOTICE OF ALLOWANCE AND FEE(S) DUE

21890

03/26/2004

PROSKAUER ROSE LLP PATENT DEPARTMENT 1585 BROADWAY NEW YORK, NY 10036-8299

EXAMINER		
TRIN	IH, BA K	
ART UNIT	PAPER NUMBER	
1625		

DATE MAILED: 03/26/2004

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/018.667	08/02/2002	Kevin B. Hatton	267/251	1717

TITLE OF INVENTION: PROCESS FOR THE PREPARATION OF REACTION PRODUCTS OF CYCLOALIPHATIC EPOXIDES WITH MULTIFUNCTIONAL HYDROXY COMPOUNDS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	06/28/2004

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. PROSECUTION ON THE MERITS IS CLOSED. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN THREE MONTHS FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. STATUTORY PERIOD CANNOT BE EXTENDED. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE REFLECTS A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE APPLIED IN THIS APPLICATION. THE PTOL-85B (OR AN EQUIVALENT) MUST BE RETURNED WITHIN THIS PERIOD EVEN IF NO FEE IS DUE OR THE APPLICATION WILL BE REGARDED AS ABANDONED.

#### **HOW TO REPLY TO THIS NOTICE:**

I. Review the SMALL ENTITY status shown above.

If the SMALL ENTITY is shown as YES, verify your current **SMALL ENTITY status:** 

A. If the status is the same, pay the TOTAL FEE(S) DUE shown above.

B. If the status is changed, pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above and notify the United States Patent and Trademark Office of the change in status, or

If the SMALL ENTITY is shown as NO:

A. Pay TOTAL FEE(S) DUE shown above, or

- B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check the box below and enclose the PUBLICATION FEE and 1/2 the ISSUE FEE shown above.
- Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- II. PART B FEE(S) TRANSMITTAL should be completed and returned to the United States Patent and Trademark Office (USPTO) with your ISSUE FEE and PUBLICATION FEE (if required). Even if the fee(s) have already been paid, Part B - Fee(s) Transmittal should be completed and returned. If you are charging the fee(s) to your deposit account, section "4b" of Part B - Fee(s) Transmittal should be completed and an extra copy of the form should be submitted.
- III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

IMPORTANT REMINDER: Utility patents issuing on applications filed on or after Dec. 12, 1980 may require payment of maintenance fees. It is patentee's responsibility to ensure timely payment of maintenance fees when due.

### PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where

PROSKAUER ROSE LLP PATENT DEPARTMENT 1585 BROADWAY NEW YORK, NY 10036-8299  APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION 10/018,667 08/02/2002 Kevin B. Hatton 267/251 1717  TITLE OF INVENTION: PROCESS FOR THE PREPARATION OF REACTION PRODUCTS OF CYCLOALIPHATIC EPOXIDES WITH MULTIFUNCH HYDROXY COMPOUNDS  APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 \$0 \$1330 06/28/2004  EXAMINER ART UNIT CLASS-SUBCLASS  TRINH, BA K 1625  1. Change of correspondence address or indication of "Fee Address" indication for	address as DRESS" for			
PROSKAUER ROSE LLP PATENT DEPARTMENT 1585 BROADWAY NEW YORK, NY 10036-8299  APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION 10018,667 0802/2002 Kevin B. Hatton 267/251 1717 TITLE OF INVENTION: PROCESS FOR THE PREPARATION OF REACTION PRODUCTS OF CYCLOALIPHATIC EPOXIDES WITH MULTIFUNCT HYDROXY COMPOUNDS  APPLIN-TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 \$0 \$1330 06/28/2004  EXAMINER ART UNIT CLASS-SUBCLASS TRINH, BA K 1625 549-546000  1. Change of correspondence address or indication of "Fee Address" indication for "Fee Address" of correspondence address (or Change of Correspondence addr	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION 10/018,667 08/02/2002 Kevin B. Hatton 26/1/251 1717  TITLE OF INVENTION: PROCESS FOR THE PREPARATION OF REACTION PRODUCTS OF CYCLOALIPHATIC EPOXIDES WITH MULTIFUNCH HYDROXY COMPOUNDS  APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 \$0 \$1330 06/28/2004  EXAMINER ART UNIT CLASS-SUBCLASS  TRINH, BA K 1625 549-546000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  CFR 1.363).  CFR 1.363.  CFR 1.365.  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is defined below, no assignee data will appear on the patent, Inclusion of assignee data is only appropriate when an assign been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  A. The following fee(s) are enclosed:  4b. Payment of Fee(s):    Stage Fee   Publication Fee   Payment of Fee(s):   A check in the amount of the fee(s) is enclosed.   Payment of Fee(s):   A check in the amount of the fee(s) is enclosed.   Payment of Fee(s):   A check in the amount of the fee(s) is enclosed.   Payment of Fee(s):   A check in the amount of the fee(s) is enclosed.   Payment of Fee(s):   A check in the amount of the fee(s) is enclosed.   Payment of Fee(s):   A check in the amount of the fee(s) is enclosed.   Payment by credit card. Form PTO-2038 is attached.	h the United an envelope ng facsimile			
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION 10/018,667 08/02/2002 Kevin B. Hatton 26/7/251 1717  TITLE OF INVENTION: PROCESS FOR THE PREPARATION OF REACTION PRODUCTS OF CYCLOALIPHATIC EPOXIDES WITH MULTIFUNCT HYDROXY COMPOUNDS  APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 \$0 \$1330 06/28/2004  EXAMINER ART UNIT CLASS-SUBCLASS  TRINH, BA K 1625 549-546000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  CFR 1.363).  CFR 1.363).  CFR 1.363).  CFR 1.363.  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assign been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assign been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  Bease check the appropriate assignee category or categories (will not be printed on the patent):   individual   corporation or other private group entity   god 4a. The following fee(s) are enclosed:   4b. Payment of Fee(s):     Acheck in the amount of the fee(s) is enclosed.     Payment by credit card. Form PTO-2038 is attached.     Payment by credit card. Form PTO-2038 is attached.	positor's name)			
TITLE OF INVENTION: PROCESS FOR THE PREPARATION OF REACTION PRODUCTS OF CYCLOALIPHATIC EPOXIDES WITH MULTIFUNCY PRODUCY COMPOUNDS	(Signature)			
TITLE OF INVENTION: PROCESS FOR THE PREPARATION OF REACTION PRODUCTS OF CYCLOALIPHATIC EPOXIDES WITH MULTIFUNCY PRODUCY COMPOUNDS	(Date)			
TITLE OF INVENTION: PROCESS FOR THE PREPARATION OF REACTION PRODUCTS OF CYCLOALIPHATIC EPOXIDES WITH MULTIFUNCY HYDROXY COMPOUNDS  APPLN.TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 \$0 \$1330 06/28/2004  EXAMINER ART UNIT CLASS-SUBCLASS  TRINH, BA K 1625 549-546000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  □ Change of correspondence address (or Change of Correspondence Address form PTO/SBI/122) attached.  □ "Fee Address" indication for "Fee Address" Indication form PTO/SBI/122 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent): □ individual □ corporation or other private group entity □ government of the fee(s) are enclosed: □ Advance Order - # of Copies □ Publication Fee □ Publ	ION NO.			
APPLN.TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE  nonprovisional NO \$1330 \$0 \$1330 06/28/2004  EXAMINER ART UNIT CLASS-SUBCLASS  TRINH, BA K 1625 549-546000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  CFR 1.362).  CFR 1.363).  CFR 1.362).  CFR 1.362	7			
nonprovisional NO \$1330 \$0 \$1330 06/28/2004  EXAMINER ART UNIT CLASS-SUBCLASS  TRINH, BA K 1625 549-546000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/47; Rev 03-02 or more recent) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignable been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filling an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent):   individual   corporation or other private group entity   gov 4a. The following fee(s) are enclosed:   A check in the amount of the fee(s) is enclosed.   Payment by credit card. Form PTO-2038 is attached.   Payment by credit card. Form PTO-2038 is attached.   Payment by credit card. Form PTO-2038 is attached.   Cenclose an extra copy of this form).	NCTIONAL			
EXAMINER  ART UNIT  CLASS-SUBCLASS  TRINH, BA K  1625  549-546000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/42;) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignable printed on the DSPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent);   individual     corporation or other private group entity   gov 4a. The following fee(s) are enclosed:   A check in the amount of the fee(s) is enclosed.   Payment by credit card. Form PTO-2038 is attached.   The Director is hereby authorized by charge the required fee(s), or credit any overpay beposit Account Number   (enclose an extra copy of this form)	UE			
TRINH, BA K  1625  549-546000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  □ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  □ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignite been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filling an assignment.  (A) NAME OF ASSIGNEE  Please check the appropriate assignee category or categories (will not be printed on the patent); □ individual □ corporation or other private group entity □ gov  4a. The following fee(s) are enclosed: □ A check in the amount of the fee(s) is enclosed. □ Publication Fee □ Payment by credit card. Form PTO-2038 is attached. □ Payment by credit card. Form PTO-2038 is attached. □ Payment by credit card. Form PTO-2038 is attached. □ The Director is hereby authorized by charge the required fee(s), or credit any overpay Deposit Account Number □ (enclose an extra copy of this form).	:004			
Change of correspondence address or indication of "Fee Address" (37   Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.    Greek Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.    Assigne NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)   PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignia been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.    Assignee Check the appropriate assignee category or categories (will not be printed on the patent);   Individual   Corporation or other private group entity   gov				
CFR 1.363).  □ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  □ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. Inclusion of assignce data is only appropriate when an assignue been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  Please check the appropriate assignce category or categories (will not be printed on the patent); □ individual □ corporation or other private group entity □ god 4a. The following fee(s) are enclosed: □ Issue Fee □ Publication Fee □ Pyment by credit card. Form PTO-2038 is attached. □ Advance Order - # of Copies □ Pyment by credit card. Form PTO-2038 is attached. □ The Director is hereby authorized by charge the required fee(s), or credit any overpay Deposit Account Number (enclose an extra copy of this form).				
4a. The following fee(s) are enclosed:  ☐ Issue Fee ☐ Publication Fee ☐ Advance Order - # of Copies ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpay Deposit Account Number (enclose an extra copy of this form).	signment has			
□ Publication Fee □ Payment by credit card. Form PTO-2038 is attached. □ Advance Order - # of Copies □ The Director is hereby authorized by charge the required fee(s), or credit any overpay Deposit Account Number (enclose an extra copy of this form).				
Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpay Deposit Account Number (enclose an extra copy of this form).				
Deposit Account Number (enclose an extra copy of this form).	mayment to			
Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.	n).			
(Authorized Signature) (Date)				
NOTE; The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.				
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.  Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.				



### UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address: COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450 www.usplo.gov

APPLICATION N	NO. F1	LING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/018,667	10/018,667 08/02/2002		Kevin B. Hatton	267/251	1717
21890	7590	03/26/2004		EXAM	INER
	ER ROSE L	<del></del>		TRINH	BA K
PATENT DI	EPARTMENT DWAY	Γ		ART UNIT	PAPER NUMBER
	K, NY 10036-	8299		1625	
				DATE MAILED: 03/26/2004	4

## Determination of Patent Term Adjustment under 35 U.S.C. 154 (b)

(application filed on or after May 29, 2000)

The Patent Term Adjustment to date is 0 day(s). If the issue fee is paid on the date that is three months after the mailing date of this notice and the patent issues on the Tuesday before the date that is 28 weeks (six and a half months) after the mailing date of this notice, the Patent Term Adjustment will be 0 day(s).

If a Continued Prosecution Application (CPA) was filed in the above-identified application, the filing date that determines Patent Term Adjustment is the filing date of the most recent CPA.

Applicant will be able to obtain more detailed information by accessing the Patent Application Information Retrieval (PAIR) system (http://pair.uspto.gov).

Any questions regarding the Patent Term Extension or Adjustment determination should be directed to the Office of Patent Legal Administration at (703) 305-1383. Questions relating to issue and publication fee payments should be directed to the Customer Service Center of the Office of Patent Publication at (703) 305-8283.